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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 118.006	
		First Inventor DON L. HEXAMER	
		Title Antifungal Composition and Method for Human Nails	
		Express Mail Label EE 556479189 US	

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P. O. Box 1450 Alexandria VA 22313-1450	
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<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 9] <i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings <i>(if filed)</i>- Detailed Description- Claim(s)- Abstract of the Disclosure <p>4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total 2]</p> <p>5. Oath or Declaration [Total Pages 2]</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i></p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i></p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on:</p> <p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p>ii. <input type="checkbox"/> Paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>
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ACCOMPANYING APPLICATION PARTS	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	<input type="checkbox"/> Power of Attorney
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i>	<input type="checkbox"/> Copies of IDS Citations
11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	
12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input checked="" type="checkbox"/> Copies of IDS Citations
13. <input checked="" type="checkbox"/> Preliminary Amendment	
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
17. <input checked="" type="checkbox"/> Other: Copy of Power of Attorney dated 10/17/02	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: 09/1770,336 *AL*

Prior application information: Examiner Sharon Lee Howard Group / Art Unit: 1615

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number: _____			or <input checked="" type="checkbox"/> Correspondence address below		
Name Irving M. Fishman					
Address 89 Headquarters Plaza Suite 1422, North Tower					
City Morristown,		State NJ		Zip Code 07960	
Country US		Telephone 973-285-1548		Fax 973-993-1857	

Name (Print/Type) Irving M. Fishman	Registration No. (Attorney/Agent) 30,258
Signature <i>Irving M. Fishman</i>	Date October 22, 2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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17231 U.S. PTO
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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$385.00

Complete if Known

Application Number	
Filing Date	Concurrently Herewith
First Named Inventor	Don L. Hexamer
Examiner Name	
Art Unit	
Attorney Docket No.	118.006

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number

Deposit Account Name

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Credit any overpayments

☐ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION						
1. BASIC FILING FEE						
Large Entity		Small Entity		Fee Description	Fee Paid	
Fee Code	Fee (\$)	Fee Code	Fee (\$)			
1001	750	2001	375	Utility filing fee		385.00
1002	330	2002	165	Design filing		
1003	520	2003	260	Plant filing fee		
1004	750	2004	375	Reissue filing		
1005	160	2005	80	Provisional filing fee		
SUBTOTAL (1)					(\$)	\$385.00

2. EXTRA CLAIM FEES FOR UTILITY AND

Extra Claims

Total Claims 13 -20** = 0 X = 0.00

Independent Claims 2 -3** = 0 X = 0.00

Multiple Dependent

Fee from below

Fee Paid

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid	
1202	2202	18	9	Claims in excess of 20		
1201	2201	84	42	Independent claims in excess of 3		
1203	2203	280	140	Multiple dependent claim, if not paid		
1204	2204	84	42	** Reissue independent claims over original patent		
1205	2205	18	9	** Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2)					(\$)	\$0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	<input type="text"/>
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
1053	130	1053	130	Non - English specification	<input type="text"/>
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	<input type="text"/>
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>
1251	110	2251	55	Extension for reply within first month	<input type="text"/>
1252	410	2252	205	Extension for reply within second month	<input type="text"/>
1253	930	2253	465	Extension for reply within third month	<input type="text"/>
1254	1,450	2254	725	Extension for reply within fourth month	<input type="text"/>
1255	1,970	2255	985	Extension for reply within fifth month	<input type="text"/>
1401	320	2401	160	Notice of Appeal	<input type="text"/>
1402	320	2402	160	Filing a brief in support of an appeal	<input type="text"/>
1403	280	2403	140	Request for oral hearing	<input type="text"/>
1451	1,510	1451	1,510	Petition to institute a public use proceeding	<input type="text"/>
1452	110	2452	55	Petition to revive - unavoidable	<input type="text"/>
1453	1,300	2453	650	Petition to revive - unintentional	<input type="text"/>
1501	1,300	2501	650	Utility issue fee (or reissue)	<input type="text"/>
1502	470	2502	235	Design issue fee	<input type="text"/>
1503	630	2503	315	Plant issue fee	<input type="text"/>
1460	130	1460	130	Petitions to the Commissioner	<input type="text"/>
1807	50	1807	50	Processing fee under 37 CFR § 1.17(q)	<input type="text"/>
1806	180	1806	180	Submission of Information Disclosure Statement	<input type="text"/>
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="text"/>
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>
1801	750	2801	375	Request for Continued Examination (RCE)	<input type="text"/>
1802	900	1802	900	Request for expedited examination of a design application	<input type="text"/>
Other fee (specify) _____					<input type="text"/>

***Reduced by Basic Filing Fee Paid**

SUBTOTAL (3)

(\$)

\$0.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Name	Irving M. Fishman	Registration No. (Attorney/Agent)	30,258	Telephone	973-285-1548
Signature				Date	October 22, 2003

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